

Worcestershire Health and Wellbeing Board's Pharmaceutical Needs Assessment

April 2015

Executive Summary

Background – What is a Pharmaceutical Needs Assessment (PNA)?

A PNA presents a comprehensive picture of current pharmaceutical service provision, which includes dispensing of prescriptions by community pharmacies, dispensing doctors and other providers, as well as a range of other services provided by community pharmacies.

Community pharmacies are based in the heart of local communities, in rural as well as urban areas, where people live, work and shop. With the significant contribution that community pharmacy can make to improve healthcare, it is important to ensure that there are an appropriate number of pharmacies, that they are in the right places and offer an appropriate range of services. The PNA helps to achieve this.

The responsibility for PNAs transferred from Primary Care Trusts (PCTs) to Health & Wellbeing Boards (HWBs) in 2012. The *NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 (The 2013 Regs)* of April 2013 state that HWBs must produce their first PNA by no later than 1st April 2015.

Process – how has the PNA been developed and what happens now?

The pharmaceutical services delivered by Worcestershire contractors (including community pharmacies and dispensing doctors) have been evaluated. Each contractor has contributed a service profile and opening times and locations have been mapped.

A number of key documents have been considered and reviewed that examine the health needs of the local population with the aim of improving health and wellbeing and reducing inequalities.

The views of the public, local patients and service users have been sought. A public and patient engagement programme has sourced the views of over 1000 contributors from Worcestershire.

The picture of current service provision is presented in **Part A** of the PNA. The next section, **Part B**, looks at the local health needs and priorities that have been identified and prioritised by the Health and Wellbeing Board for each of the six defined localities that make up Worcestershire. **Part C** considers the summary of current provision of pharmaceutical services alongside the health needs of the localities and identifies where current service provision may be deemed to be inadequate. This highlights potential gaps or “pharmaceutical needs”.

The PNA then considers how the needs and service gaps that have been identified could be met by the provision and development or extension of existing pharmaceutical services. In this way the PNA acts as a steer for planning and commissioning of relevant future services including whether new pharmacies should be allowed to open or GPs allowed to dispense.

HWBs must consult during the process of developing the PNA for a minimum period of 60 days. The responses received during this period have been considered and incorporated into the final version.

Findings

The PNA has concluded that the level of access to pharmaceutical services currently commissioned across Worcestershire generally meets the needs of the population. A pharmaceutical service in Worcestershire is provided by a cohort of contractors that are appropriately located, to meet the needs of the vast majority of the population.

The total opening hours that contractors cover, provides access from early morning to late evening, during the working week and at weekends. Whilst access is more extensive during normal working hours over the working week, reflecting the rise and

fall in demand that normally occurs, access is still considered adequate outside of normal hours and at weekends.

The dispensing pharmaceutical service provided by pharmacies is complemented by the service provided by dispensing GPs in the more rural areas reducing the distance that users have to travel to access the service.

It was noted that there is still some capacity within the existing service profile for community pharmacy to provide further support to help meet the needs and address the priorities of the HWB. There are also opportunities for service development. The developing specialist public health advisory role for community pharmacy particularly within the structure of the Healthy Living Pharmacy programme offers further opportunity for community pharmacies to support the HWB.

The public patient process revealed a high level of satisfaction on the part of respondents:

- 84% state that they have easy access to services with no problems
- Almost 70% did not identify any barrier to access to services
- Just under 40% need to travel less than a mile to reach a pharmacy
- 70% need to travel less than 2 miles to access a pharmacy
- Over 76% need to travel for less than 15 minutes to reach a pharmacy
- 83% are very or fairly satisfied with opening hours when pharmaceutical services are available

A lack of awareness of the range of services available from pharmacies and more general information about times of availability and access was highlighted by the public/patient engagement process.

Conclusions

There are some serious challenges to overcome in the drive to improve health and well being in Worcestershire. To meet these challenges there will need to be a much greater emphasis on prevention, early intervention and early help to preserve

people's health and independence. Community pharmacies have close links with their communities and are therefore well placed to support the HWB to deliver their priorities.

1. Community pharmacies should fully utilise the current service profile to maximise the contribution they can make to improving healthcare. For example;
 - Each pharmacy should fulfil their full quota of Medicines Use Reviews and the New Medicines Service by targeting appropriate patients who will benefit from these interventions
 - Further uptake of the Healthy Living Pharmacy Programme should be encouraged
 - The public/patient engagement programme has highlighted a number of areas where further improvements in service delivery can be made. All contractors are encouraged to consider and reflect on the range of comments received

2. A process to allow access by the public to general information about location and times of availability of pharmaceutical services must be developed.

3. The dispensing of prescriptions remains the cornerstone of pharmaceutical service provision and is a vital local service, clearly valued by patients in Worcestershire and delivered by a range of contractors, including community pharmacies and dispensing GPs. The term "*pharmaceutical services*" however incorporates a range of services that can be commissioned from community pharmacy and it is acknowledged that the PNA presents an opportunity for representatives of community pharmacy and service commissioners to explore together how the development of "*pharmaceutical services*" can further help to deliver the priorities of the HWB in Worcestershire.